

IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF OHIO

REC'D

MAR 9 2022

William L. Fambec 683323

(ENTER ABOVE THE NAME OF THE PLAINTIFF IN THIS ACTION)

IF THE PLAINTIFF IS A PRISONER: PRISONER # 683323

vs.

2:22 CV 1826

DE CARLO BLACKWELL

(ENTER ABOVE THE NAME OF THE DEFENDANT IN THIS ACTION)

[Judge Graham

Magistrate Judge Caroline Gentry

IF THERE ARE ADDITIONAL DEFENDANTS PLEASE LIST THEM:

LONDON CORRECTIONAL INSTITUTION (LCI)

MAUREY POPOVICH

JASON CONDRAC

OHIO DEPARTMENT OF REHAB. AND COR. (ANNETTE CHAMBERS-SMITH)

COMPLAINT

I. PARTIES TO THE ACTION:

PLAINTIFF: PLACE YOUR NAME AND ADDRESS ON THE LINES BELOW. THE ADDRESS YOU GIVE MUST BE THE ADDRESS THAT THE COURT MAY CONTACT YOU AND MAIL DOCUMENTS TO YOU. A TELEPHONE NUMBER IS REQUIRED.

William L. Fambec

NAME - FULL NAME PLEASE - PRINT

1580 ST. RT. 56, SW. (LCI)

ADDRESS: STREET, CITY, STATE AND ZIP CODE

LONDON, OHIO 43140

(740) 852-2454

TELEPHONE NUMBER

IF THERE ARE ADDITIONAL PLAINTIFFS IN THIS SUIT, A SEPARATE PIECE OF PAPER SHOULD BE ATTACHED IMMEDIATELY BEHIND THIS PAGE WITH THEIR FULL NAMES, ADDRESSES AND TELEPHONE NUMBERS. IF NO ADDITIONAL PLAINTIFFS EXIST CONTINUE WITH THIS FORM.

PAGE 2 AND 3 OF THIS FORM DEAL ONLY WITH A PLAINTIFF THAT IS INCARCERATED AT THE TIME OF FILING THIS COMPLAINT.

IF YOU ARE A PRISONER FILING A CIVIL SUIT THE FOLLOWING INFORMATION IS REQUIRED:

PREVIOUS LAWSUITS:

- A. HAVE YOU BEGUN OTHER LAWSUITS IN STATE OR FEDERAL COURT DEALING WITH THE SAME FACTS INVOLVED IN THIS ACTION OR OTHERWISE RELATING TO YOUR IMPRISONMENT? YES () NO ☒
- B. IF YOUR ANSWER TO A IS YES, DESCRIBE THE LAWSUIT IN THE SPACE BELOW. (IF THERE IS MORE THAN ONE LAWSUIT, DESCRIBE THE ADDITIONAL LAWSUITS ON ANOTHER PIECE OF PAPER, USING THE SAME OUTLINE.)

1. PARTIES TO THIS PREVIOUS LAWSUIT

PLAINTIFFS:

N/A

DEFENDANTS:

N/A

2. COURT (IF FEDERAL COURT, NAME THE DISTRICT; IF STATE COURT, NAME THE COUNTY)

N/A

3. DOCKET NUMBER

N/A

4. NAME OF THE JUDGE TO WHOM THE CASE WAS ASSIGNED

N/A

5. DISPOSITION (FOR EXAMPLE, WAS THE CASE DISMISSED? WAS IT APPEALED? IS IT STILL PENDING?)

N/A

6. APPROXIMATE DATE OF THE FILING OF THE LAWSUIT

N/A

7. APPROXIMATE DATE OF THE DISPOSITION

N/A

PLACE OF PRESENT CONFINEMENT

London Corr. Inst. (LoCI)

- A. IS THERE A PRISONER GRIEVANCE PROCEDURE IN THIS INSTITUTION?
YES ~~X~~ NO ()
- B. DID YOU PRESENT THE FACTS RELATING TO YOUR COMPLAINT IN THIS STATE PRISONER GRIEVANCE PROCEDURE? YES ~~X~~ NO ()

C. IF YOUR ANSWER IS YES:

1. WHAT STEPS DID YOU TAKE?

FILED AN INFORMAL COMPLAINT; LoCI 1021001623-
10/13/2021; LoCI 0821005006-08/27/2021; LoCI 0821003374
-08/18/2021; LoCI 0821002293-08/13/2021; LoCI 0821001355-08/08/2021

2. WHAT WAS THE RESULT?

COMPLAINT RESULT DENIED/INCONCLUSIVE

D. IF YOUR ANSWER IS NO, EXPLAIN WHY NOT.

N/A

E. IF THERE IS NO PRISON GRIEVANCE PROCEDURE IN THIS INSTITUTION, DID YOU COMPLAIN TO PRISON AUTHORITIES? YES ~~X~~ NO ()

F. IF YOUR ANSWER IS YES:

1. WHAT STEPS DID YOU TAKE?

TALKED TO UNIT STAFF MRS MALLORY FORDRICH AND MRS
JENNY FRUER IN PERSON.

2. WHAT WAS THE RESULT?

DENIED / INCONCLUSIVE, IGNORED

DEFENDANTS:

PLACE THE NAME AND ADDRESS OF EACH DEFENDANT YOU LISTED IN THE CAPTION ON THE FIRST PAGE OF THIS COMPLAINT. THIS FORM IS INVALID UNLESS EACH DEFENDANT APPEARS WITH FULL ADDRESS FOR PROPER SERVICE.

1. De Carlo Blackwell
NAMES - FULL NAME PLEASE
1580 St. Rt. 56, S.W. (LCI), London, Ohio 43140
ADDRESS - STREET, CITY, STATE AND ZIP CODE
2. LONDON CORRECTIONAL INSTITUTION (LCI)
1580 St. Rt. 56, S.W. (LCI), London, Ohio 43140
3. Mallory Popovich
1580 St. Rt. 56, S.W. (LCI), London, Ohio 43140
4. Jason Condrac
1580 St. Rt. 56, S.W. (LCI), London, Ohio 43140
5. OHIO DEPARTMENT OF REHAB AND CORR. (ANNETTE (HAMBERS-SMITH))
4545 FISHER ROAD, COLUMBUS, OHIO 43222
6. _____

IF THERE ARE ADDITIONAL DEFENDANTS, PLEASE CONTINUE LISTING THEM.

STATEMENT OF CLAIM

PLEASE WRITE AS BRIEFLY AS POSSIBLE THE FACTS OF YOUR CASE. DESCRIBE HOW EACH DEFENDANT IS INVOLVED. INCLUDE THE NAME OF ALL PERSONS INVOLVED. GIVE DATES AND PLACES.

DO NOT GIVE ANY LEGAL ARGUMENTS OR CITE ANY CASES OR STATUTES.

IF YOU HAVE A NUMBER OF DIFFERENT CLAIMS; PLEASE NUMBER AND SET FORTH EACH CLAIM IN A SEPARATE PARAGRAPH. USE AS MUCH SPACE AS YOU NEED. YOU ARE NOT LIMITED TO THE PAPERS WE GIVE YOU. ATTACH EXTRA SHEETS THAT DEAL WITH YOUR STATEMENT CLAIM IMMEDIATELY BEHIND THIS PIECE OF PAPER.

PROPERTY LOSS:

PERSONAL WALKING STICK: CLAIMANT HAS FILED ALL NECESSARY PAPERWORK ON THIS COMPLAINT, EXHAUSTING ALL REMEDIES. THE CLAIMANT IS A DISABLED INMATE AT THE LONDON CORR. INST. (LOCI). HE IS TOTALLY BLIND AND A QUALIFIED INDIVIDUAL WITH A DISABILITY. HE CAME TO PRISON WITH HIS OWN WALKING STICK, PURCHASED BY HIS FAMILY. HIS WALKING STICK WAS LOST, OR STOLEN DURING HIS TRANSFER FROM LOCI TO RICHLAND CORR. INST. (RICI) ON 08/08/2018. IT HAS NEVER BEEN FOUND, RETURNED OR REPLACED BY LOCI, RICI OR THE OHIO DEPT OF REHAB. AND CORR. (ODRC). MRS COTTON WAS THE CLAIMANTS CASE MANAGER AT RICI, AND DE CARLO BLACKWELL WAS AND STILL IS THE INSPECTOR AT LOCI. CLAIMANT HAS BROUGHT THIS MATTER TO THE ATTENTION OF STAFF AT BOTH INSTITUTIONS. THIS WALKING STICK WAS PURCHASED BY HIS FAMILY AND HAS A VALUE OF \$6,050.00. IT CAN BE LOCATED AND PURCHASED THROUGH SCULLY AND SCULLY, ITEM NUMBER dFOO00001g. IT IS A STERLING SILVER SKULL EBONY WALKING STICK WITH RUBY EYES. I HAVE INFORMED THE FOLLOWING LOCI STAFF, DE CARLO BLACKWELL INSPECTOR, JENNY HUBERBAND WARDEN, MAURORY POPOVICH CASE MANAGER, [REDACTED] JASON GINDRAL UNIT MANAGER ADMINISTRATOR (UMA) AND AMERICANS WITH DISABILITIES ACT COORDINATOR (ADA). ALSO LOCI'S TRANSPORTATION DEPARTMENT AND INVESTIGATOR, MRS COTTON CASE MANAGER FROM RICI. THE LOSS OF MY WALKING STICK HAS CAUSED MENTAL ANGUISH IN HEIGHTENED ANXIETY, AND DEPRESSION. TOTALLY BLIND WITHOUT A WALKING STICK SINCE 08/08/2018. (SEE ATTACHES)

STATEMENT OF CLAIM

I HAVE BEEN FORCED TO BE WITHOUT MY WALKING STICK FOR OVER THREE YEARS AND SEVEN MONTH. I HAVE SUFFERED PHYSICAL AND MENTAL INJURY DUE TO THIS VIOLATION. MY PHYSICAL INJURY WAS DUE TO A FALL I SUFFERED ON 01/27/2019, WHILE GOING TO THE CHOW HALL. I HIT MY HEAD AND HURT MY UPPER AND LOWER BACK.

MY WALKING STICK WAS PURCHASED IN 07-2000, BY MY SISTER COURTNEY WANCY AND MYSELF.

THIS COMPLAINT HAS ALSO BEEN FILED WITH THE DEPARTMENT OF JUSTICE, CORRECTIONAL INSTITUTION INSPECTION COMMITTEE, DISABILITY RIGHTS OHIO, AMERICAN CIVIL LIBERTIES UNION, OHIO DEPARTMENT OF REHABILITATION AND CORRECTION, AND THE NATIONAL DISABILITY RIGHTS NETWORK.

KITES, INFORMAL COMPLAINT, GRIEVANCE (LoCI)

LoCI 1021001623 - 10/15/2021

LoCI 0821005006 - 08/27/2021

LoCI 0821003374 - 08/18/2021

LoCI 0821002293 - 08/13/2021

LoCI 0821001355 - 08/03/2021

RELIEF

IN THIS SECTION PLEASE STATE (WRITE) BRIEFLY EXACTLY WHAT YOU WANT THE COURT TO DO FOR YOU. MAKE NO LEGAL ARGUMENT, CITE NO CASES OR STATUTES.

EITHER AN EXACT REPLACEMENT OF THIS WALKING STICK, OR FULL
REIMBURSEMENT OF THE COST OF THE WALKING STICK, TO INCLUDE ALL
APPLICABLE TAXES AND SHIPPING AND HANDLING FEES, AND,
DAMAGES FOR MENTAL ANGUISH
AWARD OF ATTORNEY FEES
AWARD OF FILING FEE

RELIEF SOUGHT IN THE AMOUNT OF \$25,000.00.

SIGNED THIS 27 DAY OF MARCH, 2022.


SIGNATURE OF PLAINTIFF